ORIGINAL

WV- 121 (Red)

EPA

POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION: 3

SITE NUMBER (to be assigned by Hq)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (*Preliminary Assessment*). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (*EN-335*); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: BASF-Wyandotte Corporation Landfill

B. STREET (or other identifier): 31st Street

C. CITY: Huntington

D. STATE: WV

E. ZIP CODE: 25702

F. COUNTY NAME: Cabell

G. OWNER/OPERATOR (if known)

1. NAME: BASF Wyandotte Pigments Division P. O. Box 2166, 24th St. & 5th Ave. Huntington, West Virginia 25722

2. TELEPHONE NUMBER: 304-529-1311

H. [TYPE] OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE ☐ 6. UNKNOWN

I. SITE DESCRIPTION

Partially reclaimed landfill located on the floodplain of the Guyandotte River.

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)

Superfund notification printout

K. DATE IDENTIFIED (mo., day, & yr.): 11-16-81

[L.] PRINCIPAL STATE CONTACT

1. NAME: Pamela D. Hayes, West Virginia Division of Water Resources

2. TELEPHONE NUMBER: 304-348-5935

II. PRELIMINARY ASSESSMENT (complete this section last)

[A.] APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4 NONE ☐ 5. UNKNOWN

[B.] R[ECOM]MENDATION

☐ [1. N]O ACTION NEEDED (no hazard)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR: ______
b. WILL BE PERFORMED BY: ______

☒ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR: June, 1982
b. WILL BE PERFORMED BY: State

☐ 4. SITE INSPECTION NEEDED (low priority)

[C.] PREPARER INFORMATION

1. NAME: [P]amela D. Hayes, W. Va. Div. of Water Resources

2. TELEPHONE NUMBER: 304-348-5935

3. DATE (mo., day, & yr.): 6-8-82

III. SITE INFORMATION

[A.] SITE STATUS

☐ 1. ACTIVE (Those industrial or [mu]nicipal sites which are being used [fo]r waste treatment, storage, or disposal [on] a continuing basis, even if infre[qu]ently.)

☒ 2. INACTIVE (Those sites which no longer receive wastes.)

☐ 3. OTHER (specify): ______ (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

[B. IS GENERATOR ON SITE?]

☒ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code): ______

[C.] AREA OF SITE (in acres)

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg.-min.-sec.)

2. LONGITUDE (deg.-min.-sec.)

[E. A]RE THERE BUILDINGS ON THE SITE?

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IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(*ies*) and details relating to each activity by marking 'X' in the appropriate boxes.

'X'	A. TRANSPORTER	'X'	B. STORER	'X'	C. TREATER	'X'	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION	X	1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS. TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (*specify*):		6. OTHER (*specify*):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER (*specify*):
					9. OTHER (*specify*):		

SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☐ 1. UNKNOWN ☐ 2. LIQUID ☒ 3. SOLID ☒ 4. SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☒ 1. UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4. RADIOACTIVE ☐ 5. HIGHLY VOLATILE
☐ 6. TOXIC ☐ 7. REACTIVE ☐ 8. INERT ☐ 9. FLAMMABLE

☐ 10. OTHER (*specify*):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

 ɔ – Summary of wastes prepared from file information attached.

2. Estimate the amount (*specify unit of measure*) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT Unknown	AMOUNT	AMOUNT Unknown	AMOUNT Unknown	AMOUNT Unknown	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
X (1) PAINT, PIGMENTS	(1) OILY WASTES	(1) HALOGENATED SOLVENTS	X (1) ACIDS	(1) FLYASH	(1) LABORATORY PHARMACEUT.
X (2) METALS SLUDGES	(2) OTHER (*specify*):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (*specify*): Toluene	X (3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (*specify*): Barium wastes (sulphates) (carbonates) (sulphides)			X (5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (*specify*):
			(6) CYANIDE	X (6) OTHER (*specify*): Iron oxide Sulphur Calcium sulphate	
			(7) PHENOLS		
			(8) HALOGENS		
	* A...		(9) PCB		

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V. WASTE RELATED INFORMATION (continued)

IST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

Aniline, toluene, acids, alkalies

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

Site has received unknown wastes from 1920 through 1973. Landfill is subject to floodwater.

VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo.,day,yr.)	E. REMARKS
O HAZARD				
2. HUMAN HEALTH				
3. NON-WORKER INJURY/EXPOSURE	X			Exposed wastes of unknown nature.
4. WORKER INJURY				
5. CONTAMINATION OF WATER SUPPLY				
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER	X			Monitoring well results show pollution of ground water.
8. CONTAMINATION OF SURFACE WATER	X			Leachate seeps present along Guyandotte River.
9. DAMAGE TO FLORA/FAUNA	X			Areas of no vegetation. These areas covered with white "salt" material.
10. FISH KILL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS				
13. CONTAMINATION OF SOIL				
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION				
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
17. SEWER, STORM DRAIN PROBLEMS				
18. EROSION PROBLEMS	X			Severe erosion on uncovered fill area. Motorcycles using site, eroding cover.
19. INADEQUATE SECURITY	X			No fencing or physical barrier.
20. INCOMPATIBLE WASTES				
21. MIDNIGHT DUMPING				
22. OTHER (specify):				

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VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- [ ] 1. NPDES PERMIT
- [ ] 2. SPCC PLAN
- [X] 3. STATE PERMIT *(specify)*: IW-5959-77
- [ ] 4. AIR PERMITS
- [ ] 5. LOCAL PERMIT
- [ ] 6. RCRA TRANSPORTER
- [ ] 7. RCRA STORER
- [ ] 8. RCRA TREATER
- [ ] 9. RCRA DISPOSER
- [ ] 10. OTHER *(specify)*:

B. IN COMPLIANCE?

- [ ] 1. YES
- [X] 2. NO
- [ ] 3. UNKNOWN

4. WITH RESPECT TO *(list regulation name & number)*: Water Pollution Control Act: Chapter 20, Article 5A, Section 5

VIII. PAST REGULATORY ACTIONS

- [X] A. NONE
- [ ] B. YES *(summarize below)*

IX. INSPECTION ACTIVITY *(past or on-going)*

- [ ] A. NONE
- [X] B. YES *(complete items 1,2,3, & 4 below)*

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
Possible hazardous waste site inspection and	Dec., 1979	State	Preliminary site evaluation
closure inspection	Dec., 1979	State	Assessment of closure requirements

X. REMEDIAL ACTIVITY *(past or on-going)*

- [X] A. NONE
- [ ] B. YES *(complete items 1, 2, 3, & 4 below)*

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment *(Section II)* information on the first page of this form.

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